

08-22-01

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PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	25079A
First Inventor	Cichocki
Title	Moldable pellet based on the
Express Mail Label No.	EL846771740US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 17] (preferred arrangement set forth below)	a. <input type="checkbox"/> Computer Readable Form (CRF)
- Descriptive title of the invention	b. Specification Sequence Listing on:
- Cross Reference to Related Applications	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or
- Statement Regarding Fed sponsored R & D	ii. <input type="checkbox"/> paper
- Reference to sequence listing, a table, or a computer program listing appendix	c. <input type="checkbox"/> Statements verifying identity of above copies
- Background of the Invention	
- Brief Summary of the Invention	
- Brief Description of the Drawings (if filed)	
- Detailed Description	
- Claim(s)	
- Abstract of the Disclosure	
<input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 2]	
4. Oath or Declaration [Total Pages]	
a. <input type="checkbox"/> Newly executed (original or copy)	
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 17 completed)	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
5. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	

9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney
11. <input type="checkbox"/> English Translation Document (if applicable)
12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations
13. <input type="checkbox"/> Preliminary Amendment
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. <input type="checkbox"/> Other:

ACCOMPANYING APPLICATION PARTS

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: /

Prior application information: Examiner: Group / Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	22889 (Insert Customer No. or Attach bar code label here)	or	<input type="checkbox"/> Correspondence address below
Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

Name (Print/Type)	James J. Dottavio	Registration No. (Attorney/Agent)	40,360
Signature			Date 8-21-01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$ 710.00

Complete if Known

Application Number	Herewith
Filing Date	Herewith
First Named Inventor	Cichocki
Examiner Name	
Group Art Unit	
Attorney Docket No.	25079A

METHOD OF PAYMENT

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
Number

50-0568

Deposit
Account
Name

Owens-Corning Fiberglas Technology, Inc.

- ☒
- Charge Any Additional Fee Required
-
- Under 37 CFR 1.16 and 1.17

- ☐
- Applicant claims small entity status.
-
- See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:

- ☐
- Check
- ☐
- Credit card
- ☐
- Money
-
- Order
- ☐
- Other

FEE CALCULATION**BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	710.00
106	320	206	160	Design filing fee	0.00
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	0.00
114	150	214	75	Provisional filing fee	0.00

SUBTOTAL (1) (\$ 710.00

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
20	-20** = 0	18.00	0.00
2	-3** = 0	80.00	0.00
Multiple Dependent		0	0.00

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00

**or number previously paid, if greater; For Reissues, see above

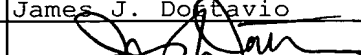
FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	0.00
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	0.00
139	130	139	130	Non-English specification	0.00
147	2,520	147	2,520	For filing a request for ex parte reexamination	0.00
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	0.00
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	0.00
115	110	215	55	Extension for reply within first month	0.00
116	390	216	195	Extension for reply within second month	0.00
117	890	217	445	Extension for reply within third month	0.00
118	1,390	218	695	Extension for reply within fourth month	0.00
128	1,890	228	945	Extension for reply within fifth month	0.00
119	310	219	155	Notice of Appeal	0.00
120	310	220	155	Filing a brief in support of an appeal	0.00
121	270	221	135	Request for oral hearing	0.00
138	1,510	138	1,510	Petition to institute a public use proceeding	0.00
140	110	240	55	Petition to revive - unavoidable	0.00
141	1,240	241	620	Petition to revive - unintentional	0.00
142	1,240	242	620	Utility issue fee (or reissue)	0.00
143	440	243	220	Design issue fee	0.00
144	600	244	300	Plant issue fee	0.00
122	130	122	130	Petitions to the Commissioner	0.00
123	50	123	50	Petitions related to provisional applications	0.00
126	240	126	240	Submission of Information Disclosure Stmt	0.00
581	40	581	40	Recording each patent assignment per property (times number of properties)	0.00
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	0.00
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	0.00
179	710	279	355	Request for Continued Examination (RCE)	0.00
169	900	169	900	Request for expedited examination of a design application	0.00
Other fee (specify)					0.00

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0.00

SUBMITTED BY**Complete (if applicable)**

Name (Print/Type)	James J. Dostavio	Registration No. (Attorney/Agent)	40,360	Telephone	740/321-7167
Signature				Date	8-21-01

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